

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	20255	8-9-99
O.I.P.E. CLASSIFIER		16	8-11-99
FORMALITY REVIEW		65703	8-18-99
		65703	11-1-99

INDEX OF CLAIMS

☒ Rejected
☒ Allowed
 (Through numeral) Canceled
☒ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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